Fill in this information to identify your o	Ĺ		
United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS			
Case number (if known):	Chapter you are filing under: Chapter 7 Chapter 11 Chapter 12 Chapter 13		Check if this is a amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together--called a joint case--and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Ŀ	art 1 Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example,	Eliezer First Name	First Name
	your driver's license or passport).	Middle Name	Middle Name
		Encarnacion	
	Bring your picture identification to your meeting	Last Name	Last Name
	with the trustee.	Suffix (Sr., Jr., II, III)	Suffix (Sr., Jr., II, III)
2.	All other names you		
	have used in the last 8 years	First Name	First Name
	Include your married or maiden names.	Middle Name	Middle Name
	maiden names.	Last Name	Last Name
3.	Only the last 4 digits of your Social Security	xxx - xx - <u>3</u> <u>3</u> <u>6</u> <u>5</u>	xxx - xx
	number or federal Individual Taxpayer	OR	OR
	Identification number (ITIN)	9xx - xx	9xx - xx
4.	Any business names and Employer Identification Numbers	✓ I have not used any business names or EINs.	☐ I have not used any business names or EINs.
	(EIN) you have used in the last 8 years	Business name	Business name
	Include trade names and	Business name	Business name
	doing business as names	Business name	Business name

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First Name	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
		<u></u>
		<u></u>
5. Where you live		If Debtor 2 lives at a different address:
	121 S. Martin	
	Number Street	Number Street
	Waukegan IL 60085	
	City State ZIP Code Lake	City State ZIP Code
	County	County
	If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to you at this mailing address.
	Number Street	Number Street
	P.O. Box	P.O. Box
	City State ZIP Code	City State ZIP Code
6. Why you are choosing	Check one:	Check one:
this district to file for bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	I have another reason. Explain. (See 28 U.S.C. § 1408.)
Part 2: Tell the Court	About Your Bankruptcy Case	
7. The chapter of the Bankruptcy Code you	Check one: (For a brief description of each, see No for Bankruptcy (Form 2010)). Also, go to the top of	otice Required by 11 U.S.C. § 342(b) for Individuals Filing page 1 and check the appropriate box.
are choosing to file under	Chapter 7	
	Chapter 11	
	☐ Chapter 12	
	☑ Chapter 13	

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	First Name	Middle Name	Ducathieu Page 3 01	47	`	
8.	How you will pay the fee	court pay w	pay the entire fee when I file my petiti for more details about how you may pay vith cash, cashier's check, or money orde If, your attorney may pay with a credit ca	. Typical er. If you	ly, if you are payi r attorney is subn	ng the fee yourself, you may nitting your payment on your
			d to pay the fee in installments. If you duals to Pay Your Filing Fee in Installme			nd attach the Application for
		By law than fee in	uest that my fee be waived (You may row, a judge may, but is not required to, wantow of the official poverty line that apply installments). If you choose this option Fee Waived (Official Form 103B) and fi	ive your lies to you , you mus	fee, and may do ur family size and st fill out the Appl	so only if your income is less I you are unable to pay the
9.	Have you filed for bankruptcy within the	□ No				
	last 8 years?	✓ Yes.				
		District N	.D. of IL ESTRN DIV. (Ch.13 Discha	ar When	03/26/2012 MM / DD / YYYY	Case number 12-12045
		District _		_ When	MM / DD / YYYY	Case number
		District _		_ When	MM / DD / YYYY	Case number
10.	Are any bankruptcy cases pending or being	☑ No				
	filed by a spouse who is	Yes.				
	not filing this case with you, or by a business	Debtor _			Relationshi	p to you
	partner, or by an	District		When		Case number,
	affiliate?				MM / DD / YYYY	if known
		Debtor _			Relationshi	p to you
		District _		When		Case number,
					MM / DD / YYYY	if known
11.	Do you rent your residence?	✓ No. ☐ Yes.	Go to line 12. Has your landlord obtained an eviction residence?	judgmen	t against you and	l do you want to stay in your
			No. Go to line 12.Yes. Fill out Initial Statement Abo	ut an Evi	ction Judgment A	Against You (Form 101A)

and file it with this bankruptcy petition.

Deb	tor 1 Case 16-08127 First Name	Doc		Filed 03/09/16 Entered 03/09/16 Document Page 4 of 47e number	13:20:12 er (if known)	Desc	Main
P				sses You Own as a Sole Proprietor			
12.	Are you a sole proprietor of any full- or part-time business?	I		Go to Part 4. Name and location of business			
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.			Name of business, if any Number Street			
	If you have more than one sole proprietorship, use a separate sheet and attach it to this petition.			City Check the appropriate box to describe your busines. Health Care Business (as defined in 11 U.S.C. Single Asset Real Estate (as defined in 11 U.S.C. § 101(53) Commodity Broker (as defined in 11 U.S.C. § None of the above	. § 101(27A)) S.C. § 101(51B BA))	ZIP Cod	de
13.	13. Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?		set ap	filing under Chapter 11, the court must know whether propriate deadlines. If you indicate that you are a small balance sheet, statement of operations, cash-flow these documents do not exist, follow the procedure I am not filing under Chapter 11.	mall business d statement, and	lebtor, you I federal ind	must attach your come tax return
	For a definition of small business debtor, see 11 U.S.C. § 101(51D).		No.	I am filing under Chapter 11, but I am NOT a small the Bankruptcy Code.			
	11 0.0.0. 3 101(012).		Yes.	I am filing under Chapter 11 and I am a small busin Bankruptcy Code.	ess debtor acc	cording to th	ne definition in the
P	Report If You O	wn or	Hav	e Any Hazardous Property or Any Prope	rty That Ne	eds Imm	ediate Attentior
14.	Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or		No Yes.	What is the hazard?			
	safety? Or do you own any property that needs immediate attention?			If immediate attention is needed, why is it needed?			
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?			Where is the property? Number Street			
				City		State	ZIP Code

Debtor 1

Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling

15. Tell the court whether you have received briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

 I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about	t
credit counseling because of:	

Incapacity. I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

 □ Disability. My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I

reasonably tried to do so. Active duty. I am currently on active military

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court. About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about	t
credit counseling because of:	

☐ Incapacity. I have a mental illness or a mental

> deficiency that makes me incapable of realizing or making rational decisions about finances.

My physical disability causes me □ Disability. to be unable to participate in a

briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

duty in a military combat zone.

Deb	otor 1 Case 16-08127 First Name	Doc Middle Na	Encarnaçio	ỗ, ∣ Sn F	Entered 03/09/16 13: Page 6 of 47 ^{e number (if}	20: know	12 Desc Main
P	art 6: Answer These	Questic	ons for Reporting P	urpo	ses		
16.	What kind of debts do you have?	16a.	•	dual p	nsumer debts? Consumer de rimarily for a personal, family,		ure defined in 11 U.S.C. § 101(8) usehold purpose."
		16b.	•	inves	siness debts? Business debt tment or through the operation		e debts that you incurred to obtain e business or investment.
		16c.	State the type of debts y	ou ow	e that are not consumer or bus	sines	s debts.
17.	Are you filing under Chapter 7?	V	No. I am not filing unde	r Cha	pter 7. Go to line 18.		
	Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?		· ·	•	•	•	xempt property is excluded and to distribute to unsecured creditors?
18.	How many creditors do you estimate that you owe?		1-49 50-99 100-199 200-999		1,000-5,000 5,001-10,000 10,001-25,000		25,001-50,000 50,001-100,000 More than 100,000
19.	How much do you estimate your assets to be worth?		\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million		\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million		\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion
20.	How much do you estimate your liabilities to be?		\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million		\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million		\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion
Pa	art 7: Sign Below						
For	you		e examined this petition, a correct.	and I c	leclare under penalty of perjury	that	the information provided is true
	If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11, 12 or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.						•
	If no attorney represents me and I did not pay or agree to pay someone who is an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).						
		I requ	uest relief in accordance w	ith the	e chapter of title 11, United Sta	ates C	code, specified in this petition.
		امرير ا	aratand making a falsa atı	otom o	nt concooling property or obt	ainin ~	manay or proporty by froud in

I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

X	/s/ Eliezer Encarnacion	x
	Signature of Debtor 1	Signature of Debtor 2
	Executed on 03/05/2016 MM / DD / YYYY	Executed on MM / DD / YYYY

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For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

(/s/ Kenneth S. Borcia	[Date	03/05/2016
	Signature of Attorney for Debtor			MM / DD / YYYY
	Kenneth S. Borcia Printed name			
	Kenneth S. Borcia & Associates			
	Firm Name			
	1117 S. Milwaukee, Suite A-3			
	Number Street			
	Libertyville	<u>IL</u>		60048
	City	State		ZIP Code
	Contact phone (847) 634-8800	Email address		
	<u> </u>	_		
	3125988			
	Bar number	State		_

Fill in this in	formation to identify	your case and this filing:	<i>'</i>	
Debtor 1	Eliezer	Encarnacion		
		lle Name Last Name		
Debtor 2 (Spouse, if filing	a) First Name Midd	lle Name Last Name		
		RTHERN DISTRICT OF ILLINOIS		
Case number	ankrupicy Court for the. 140	KITIEKN DISTRICT OF IEEINOIS		
(if known)				if this is an ed filing
			J	Ü
Official Forn	n 106A/B			
Schedule A	VB: Property			12/15
the asset in the of filing together, b sheet to this form	category where you think in oth are equally responsible m. On the top of any additi	be items. List an asset only once. If an a trits best. Be as complete and accurate a e for supplying correct information. If mo onal pages, write your name and case nu ce, Building, Land, or Other Real I	is possible. If two married pe re space is needed, attach a s mber (if known). Answer eve	ople are separate ry question.
☐ No. Go	or have any legal or equiton to Part 2. The property?	able interest in any residence, building, la	and, or similar property?	
1.1. home - 121 S>	Martin Ave., Waukegan	What is the property? Check all that apply. ☐ Single-family home ☐ Duplex or multi-unit building	Do not deduct secured clair amount of any secured clair Creditors Who Have Claims	ms on <i>Schedule D:</i>
County		Condominium or cooperative	entire property?	portion you own?
		☐ Manufactured or mobile home☐ Land	\$100,000.00	\$100,000.00
		☐ Investment property ☐ Timeshare ☐ Other	Describe the nature of you interest (such as fee simp entireties, or a life estate)	le, tenancy by the
		Who has an interest in the property?	joint tenants	
		Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and anoth	Check if this is comm (see instructions)	unity property
		Other information you wish to add abo property identification number:	ut this item, such as local	_
	•	own for all of your entries from Part 1, in r Part 1. Write that number here		\$100,000.00
Part 2: Do	escribe Your Vehicles			
•	-	ole interest in any vehicles, whether they asse a vehicle, also report it on Schedule G:	_	•
3. Cars, vans,	trucks, tractors, sport utili	ty vehicles, motorcycles		
□ No ☑ Yes				

Debt	case 16-08127 DOC 1 for 1 Eliezer First Name Middle Name	Do Eukanenation Page 9 of 42	99/16 13:20:12 D6 e number (if known)	esc Main
Othe	el: coximate mileage: er information: 5 Chevy Equinox	Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) and other recreational vehicles, other veh	Do not deduct secured clair amount of any secured clair Creditors Who Have Claims Current value of the entire property? \$5,000.00	ms on Schedule D:
		nal watercraft, fishing vessels, snowmobiles, m		
		own for all of your entries from Part 2, inclured Part 2. Write that number here	_	\$5,000.00
Pa	nt 3: Describe Your Personal	and Household Items		
Do y	ou own or have any legal or equitable i	nterest in any of the following items?		Current value of the portion you own? Do not deduct secured claims or exemptions.
	_	nens, china, kitchenware tove,washer/dryer bedroom furniture, k o, video & computer equipment, misc. h	_	\$2,310.00
	•	, video, stereo, and digital equipment; compute devices including cell phones, cameras, media		
		ngs, prints, or other artwork; books, pictures, o collections; other collections, memorabilia, col		
	☐ No ☑ Yes. Describe Books, pictures	s & collections		\$100.00
	Equipment for sports and hobbies Examples: Sports, photographic, exercise canoes and kayaks; carpentry	e, and other hobby equipment; bicycles, pool t	ables, golf clubs, skis;	
	☐ No ☑ Yes. Describe sports & hobby	<i>r</i> equipment		\$300.00
	Firearms Examples: Pistols, rifles, shotguns, amm	unition, and related equipment		
	✓ No ☐ Yes. Describe			
	Clothes Examples: Everyday clothes, furs, leather □ No	er coats, designer wear, shoes, accessories		
	Yes. Describe clothing			\$200.00

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Deb	tor 1 Eliezer		Page 10 of 47e number (if known) _	
	First Name Middle Name	Last Name		
12.	Jewelry Examples: Everyday jewelry, costume jewel gold, silver	ry, engagement rings,	wedding rings, heirloom jewelry, watches, ge	ems,
	☐ No ☑ Yes. Describe Furs & jewelry			\$1,000.00
13.	Non-farm animals Examples: Dogs, cats, birds, horses			
	✓ No ☐ Yes. Describe			
14.	Any other personal and household items did not list	you did not already li	st, including any health aids you	
	✓ No Yes. Give specific information			
15.	Add the dollar value of all of your entries attached for Part 3. Write the number her	_		\$3,910.00
Pa	art 4: Describe Your Financial A	ssets		
Do	ou own or have any legal or equitable inte	erest in any of the follo	owing?	Current value of the portion you own? Do not deduct secured claims or exemptions.
16.	Cash Examples: Money you have in your wallet, in petition	n your home, in a safe	deposit box, and on hand when you file your	
	☐ No ☑ Yes		Cash:	\$75.00
17.	Deposits of money Examples: Checking, savings, or other finar brokerage houses, and other siminstitution, list each.		ntes of deposit; shares in credit unions, have multiple accounts with the same	
	☐ No ✓ Yes	Institution name:		
	17.1. Checking account:	Chase		\$8,000.00
18.	Bonds, mutual funds, or publicly traded s Examples: Bond funds, investment account		money market accounts	
	✓ No ☐ Yes Institution or iss	suer name:		
10	Non-publicly traded stock and interests in	n incorporated and un	incornorated husinesses including	 -
	an interest in an LLC, partnership, and joi	-	porated submesses, moluling	
	✓ No Yes. Give specific			
	information about			
	them Name of entity:		% of ownersh	in [.]

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20.	Neg	otiable instruments inc	lude personal checks	negotiable and non s, cashiers' checks, p	-negotiable instruments promissory notes, and money orde ne by signing or delivering them.	ers.	
		No Yes. Give specific information about them	Issuer name:	iot transfer to someon	ie by signing of delivering them.		
21.		rement or pension ac mples: Interests in IRA profit-sharing p	A, ERISA, Keogh, 40°	1(k), 403(b), thrift sav	rings accounts, or other pension o	r	
	_	No Yes. List each	Type of account:	Institution name:			
	_	account separately.	401(k) or similar plar	n: 401k			Unknown
			Pension plan:				
			IRA:				
			Retirement account:				
			Keogh:				
			Additional account: Additional account:				
22.	Youi Exa		eposits you have ma		ontinue service or use from a com electric, gas, water), telecommunio		
	<u> </u>	No Yes	ı	Institution name or in	dividual:		
23.	_				ou, either for life or for a number o	of years)	
		No Yes	Issuer name and d	lescription:			
24.		rests in an education J.S.C. §§ 530(b)(1), 52			program, or under a qualified st	tate tuition prog	ram.
	بخا	No Yes	Institution name an	nd description. Sepa	rately file the records of any intere	sts. 11 U.S.C. §	521(c)
25.	pow	sts, equitable or futur ers exercisable for you No Yes. Give specific information about them	our benefit	erty (other than anyt	hing listed in line 1), and rights o	or	

Deb	tor 1	Case 16-08127 Eliezer		Documentation		03/09/16 13:20: 0fc43e number (if know		esc Main
			iddle Name	Last Name				
26.	Exa	ents, copyrights, trademar mples: Internet domain nan				•		
		Yes. Give specific information about them						
27.		enses, franchises, and oth mples: Building permits, ex	_	-	ation holdings	s, liquor licenses, profess	sional licen	ses
	_	No Yes. Give specific information about them						
Mor	ney o	r property owed to you?						Current value of the portion you own? Do not deduct secured claims or exemptions.
28.	Tax	refunds owed to you						
		No Yes. Give specific informat	tion				Federal	: \$0.00
		about them, including wheth you already filed the returns					State:	\$0.00
		and the tax years					Local:	\$0.00
29.	Exa	nily support mples: Past due or lump su	ım alimony,	spousal support, child su	upport, mainte	nance, divorce settleme	nt, property	/ settlement
	<u> </u>	No Yes. Give specific informat	ion			Alimony:		\$0.00
						Maintena	ance:	\$0.00
						Support:		\$0.00
						Divorce	settlement:	\$0.00
						Property	settlemen	t:\$0.00
30.	Exa	er amounts someone owe mples: Unpaid wages, disa compensation, Soci No Yes. Give specific informat	bility insura al Security	nce payments, disability t benefits; unpaid loans yo	benefits, sick ou made to sor	pay, vacation pay, worke meone else	ers'	
31.		rests in insurance policies mples: Health, disability, or		ce; health savings accou	ınt (HSA); cred	dit, homeowner's, or rent	ter's insura	nce
	_	No Yes. Name the insurance company of each policy and list its value	Company	name:	B	deneficiary:	Su	rrender or refund value:
32.	If yo	interest in property that is u are the beneficiary of a liv led to receive property beca	ving trust, e	xpect proceeds from a life		olicy, or are currently		
	بخا	No Yes. Give specific informat	ion					
33.		ms against third parties, v		-		a demand for payment	t	

Deb	Case 16-08127 Doc 1 Filed 03/09/16 Entered 03/09/16 13:20:12 Doctor 1 Eliezer Doctor Page 13 of 47 e number (if known) Last Name Last Name	esc Main
34.	Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims	
	✓ No ☐ Yes. Describe each claim	
35.	Any financial assets you did not already list	
	✓ No ☐ Yes. Give specific information	
36.	Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached for Part 4. Write that number here	\$8,075.00
Pá	Describe Any Business-Related Property You Own or Have an Interest In. List any	y real estate in Part 1.
37.	Do you own or have any legal or equitable interest in any business-related property?	
	✓ No. Go to Part 6. ☐ Yes. Go to line 38.	
		Current value of the portion you own? Do not deduct secured claims or exemptions.
38.	Accounts receivable or commissions you already earned	ciaims of exemptions.
	✓ No ☐ Yes. Describe	
39.	Office equipment, furnishings, and supplies Examples: Business-related computers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices	
	✓ No ☐ Yes. Describe	
40.	Machinery, fixtures, equipment, supplies you use in business, and tools of your trade	
	✓ No Yes. Describe	
41.	Inventory	
	✓ No Yes. Describe	
42.	Interests in partnerships or joint ventures	
	✓ No✓ Yes. Describe Name of entity:% of ownership:	
		
43.	Customer lists, mailing lists, or other compilations	
	 ✓ No Yes. Do your lists include personally identifiable information (as defined in 11 U.S.C. § 101(41A))? 	

Deb	tor 1	Case 16-082			Entered 03/09/16 13:20:12 Page 14 of 4 of a number (if known)	Desc Main
44	A	First Name	Middle Name	Last Name		
44.	-		property you did n	ot aiready list		
	\Box	No Yes. Give specific information				
		,				
45.					any entries for pages you have	. → \$0.00
D,	art 6	Dosariba An	v Form and Co	ommoroial Fishing	Polated Property Vou Own or Ha	vo an Interest In
Г	art 6			in farmland, list it in	Related Property You Own or Ha Part 1.	ve an interest in.
46.	Dov	ou own or have a	nv legal or equitab	ole interest in any farm-	or commercial fishing-related property?	
	-	No. Go to Part 7.	.,	,		
		Yes. Go to line 47.				
						Current value of the
						portion you own? Do not deduct secured claims or exemptions.
47.		n animals mples: Livestock, p	ooultry, farm-raised	fish		
	\checkmark	No Yes	,,			
48.	Cro	oseither growing	or harvested			
		No				
		Yes. Give specific information				
49.				s, machinery, fixtures, a	and tools of trade	
	ي ب	No Yes				
50.	Farr	n and fishing supp	olies, chemicals, ai	nd feed		
		No Yes				
51.	Any	farm- and comme	rcial fishing-relate	d property you did not	already list	
		No Yes. Give specific information				
52.				_	any entries for pages you have	\$0.00

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Debtor 1

62. Total personal property. Add lines 56 through 61.....

63. Total of all property on Schedule A/B. Add line 55 + line 62.....

\$16,985.00

\$116,985.00

Doction Page 15 of 47e number (if known) Eliezer Middle Name Describe All Property You Own or Have an Interest in That You Did Not List Above Part 7: 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership **☑** No ☐ Yes. Give specific information..... \$0.00 54. Add the dollar value of all of your entries from Part 7. Write that number here..... Part 8: List the Totals of Each Part of this Form \$100,000.00 \$5,000.00 56. Part 2: Total vehicles, line 5 57. Part 3: Total personal and household items, line 15 \$3,910.00 58. Part 4: Total financial assets, line 36 \$8,075.00 59. Part 5: Total business-related property, line 45 \$0.00 60. Part 6: Total farm- and fishing-related property, line 52 \$0.00 61. Part 7: Total other property not listed, line 54 \$0.00 Copy personal

\$16,985.00

property total

Fill in this inf	ormation to i	dentify your case	:		
Debtor 1	Eliezer		Encarnacion		
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse, if filing)	First Name	Middle Name	Last Name		
United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS					
Case number					
(if known)			_		

Official Form 106C

Schedule C: The Property You Claim as Exempt

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Cla	aim as Exempt			
 Which set of exemptions are you claiming? You are claiming state and federal nonbar You are claiming federal exemptions. 11 For any property you list on Schedule A/B the 	nkruptcy exemptions. U.S.C. § 522(b)(2)	• ,,,,	·	
Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption	
	Schedule A/B	Check only one box for each exemption		
Brief 2005 Chevy Equinox description: Line from Schedule A/B: 3.1	\$5,000.00	\$2,400.00 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(c)	
Brief Refrigerator, description: stove,washer/dryer bedroom Line from Schedule A/B:6	\$2,310.00	\$2,310.00 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)	
3. Are you claiming a homestead exemption of Sch Official Form 106C (Subject to adjustment on 4/01/16 and every 3 ✓ No ✓ Yes. Did you acquire the property covered ✓ No ✓ Yes				

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Case number (if known)

Debtor 1

Eliezer

First Name Middle Name

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Check only one box for each exemption	
Brief Books, pictures & collections description: Line from Schedule A/B: 8	\$100.00	\$100.00 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)
Brief sports & hobby equipment description: Line from Schedule A/B: 9	\$300.00	\$300.00 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)
Brief clothing description: Line from Schedule A/B: 11	\$200.00	\$200.00 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(a), (e)
Brief Furs & jewelry description: Line from Schedule A/B: 12	\$1,000.00	\$1,000.00 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)
Brief Cash description: Line from Schedule A/B: 16	\$75.00	\$75.00 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)
Brief Chase description: Line from Schedule A/B:	\$8,000.00	\$215.00 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)

Case	10-09	3127 DOG	_		nereu 03 <u>ne 18 of </u> 4	/09/10 13 17	20.12 Desc N	/lalli
Fill in this inf	ormati	ion to identi			IP 18 01 2	+ /		
	Ormati	on to lacint	ry your case	!				
Debtor 1	Elieze		Middle Nosse	Encarnacio	<u>n</u>			
	First Na	me i	Middle Name	Last Name				
Debtor 2	=:							
(Spouse, if filing)	First Na	me I	Middle Name	Last Name				
United States Bar	nkruptcy	Court for the:	NORTHERN D	DISTRICT OF ILLI	INOIS			
		-						
Case number (if known)					_		☐ Check if this is	
,							amended filing	J
Official Form	106E)						
Schedule D.	Crac	- Hitare Wha	n Have Cla	aims Secured	d by Pror	artv		12/15
Octricadic D.	Olcc	altors will	o Have Old	iiiii occurce	арутор	Jerty		12/13
							ly responsible for sup	
		•				nber the entri	ies, and attach it to thi	s form.
On the top of any	auuilioi	iai pages, wiit	e your name ar	nd case number (if	Kilowiij.			
1. Do any credit	ors hav	e claims secu	red by your pro	perty?				
-					r echadulae	You have not	ning else to report on th	is form
		the information		court with your office	i soricadios.	Tou have nou	ing cise to report on th	13 101111.
Part 1: Lis	t All S	ecured Clair	ms					
			has more than					
			each claim. If m		Colum		Column B	Column C
			other creditors Inhabetical orde	r according to the		nt of claim t deduct the	Value of collateral that supports this	Unsecured portion
creditor's nam		aro darrio irra	priabolicai orac	r doording to the		of collateral	claim	If any
			Doscribo the	e property that				,
2.1			secures the		;	\$26,853.00	\$100,000.00	
Carrington Mort	gage S	ervices	– home					
Creditor's name P.O. Box 3489								
Number Street								
			_					
Anaheim	CA	92803		ite you file, the clai	m is: Check	all that apply.		
City	State	ZIP Code	Continge					
Who owes the del	ot? CI	heck one.	Unliquid					
Debtor 1 only			☐ Disputed	1				
Debtor 2 only			Nature of lie	en. Check all that a	ipply.			
Debtor 1 and D				ement you made (su	_	-	l car loan)	
At least one of	the deb	tors and anothe		y lien (such as tax lie		s lien)		
Charlettele	.la!u!	latas	_	nt lien from a lawsui				
Check if this of to a community		ates	U Otner (in	ncluding a right to of	iset)			
	-, 4000							
Date debt was inc	urred		Last 4 digits	s of account number	er			

Add the dollar value of your entries in Column A on this page. Write that number here:

\$26,853.00

home

Debtor 1

Part 1:

P.O. Box 3489 Number

Anaheim

Street

Who owes the debt?

Debtor 1 only

2.2

Eliezer First Name

Carrington Mortgage Services

Additional Page

CA

State

Middle Name

After listing any entries on this page, number them

sequentially from the previous page.

92803

Check one.

ZIP Code

Documentation Page:

Documentation Page 1	9 0104₃∕ e number (if	known)				
ne Last Name						
his page, number them us page.	Column A Amount of claim Do not deduct the value of collateral	Column B Value of collateral that supports this claim	Column C Unsecured portion If any			
Describe the property that secures the claim:	\$15,254.00	\$15,254.00				
home						
As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed						
Nature of lien. Check all that apply.	mortgage or cocured	car loan)				
An agreement you made (such as Statutory lien (such as tax lien, me		cai ioaii)				
Judgment lien from a lawsuit	,					
Other (including a right to offset)	Mortgage arrears					

Debtor 2 only	Nature of lien. Check all that apply.			
Debtor 1 and Debtor 2 only	An agreement you made (such as	s mortgage or secured car	loan)	
At least one of the debtors and another	Statutory lien (such as tax lien, m	echanic's lien)		
_	Judgment lien from a lawsuit			
Check if this claim relates	Other (including a right to offset)	Mortgage arrears		
to a community debt	_		_	
Date debt was incurred Various	Last 4 digits of account number			
2.3	Describe the property that secures the claim:	\$91,388.00	\$100,000.00	
Trinity Financial Services	home			
Creditor's name	nome			
2618 San Miguel Dr., Ste. 303 Number Street				
Newport Beach CA 92660	As of the date you file, the claim is:	Check all that apply		
City State ZIP Code	Contingent	onook an that apply.		
,	☐ Unliquidated			
Who owes the debt? Check one.	☐ Disputed			
Debtor 1 only				
Debtor 2 only	Nature of lien. Check all that apply.			
Debtor 1 and Debtor 2 only	An agreement you made (such as	s mortgage or secured car	loan)	
At least one of the debtors and another	Statutory lien (such as tax lien, mechanic's lien)			
_	Judgment lien from a lawsuit			
☐ Check if this claim relates	Other (including a right to offset)			
to a community debt	_			
Date debt was incurred	Last 4 digits of account number			

Add the dollar value of your entries in Column A on this page. Write that number here:

\$106,642.00

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Statutory lien (such as tax lien, mechanic's lien)

Judgment lien from a lawsuit

Other (including a right to offset)

Last 4 digits of account number

Debtor 1

Part 1:

Creditor's name

2.4

Number

Eliezer First Name

Trinity Financial Services

Street

Newport Beach

☐ Debtor 1 only Debtor 2 only

Who owes the debt?

☐ Debtor 1 and Debtor 2 only

☐ Check if this claim relates

Date debt was incurred Various

to a community debt

2618 San Miguel Dr., Ste. 303

CA

State

At least one of the debtors and another

Additional Page

Middle Name

After listing any entries on this page, number them

sequentially from the previous page.

92660

Check one.

ZIP Code

his page, number them us page.	Column A Amount of claim Do not deduct the value of collateral	Column B Value of collateral that supports this claim	Column C Unsecured portion If any
Describe the property that secures the claim:	\$30,660.00	\$30,660.00	
home			
As of the date you file, the claim is:	Check all that apply.		
Contingent			
☐ Unliquidated ☐ Disputed			
Nature of lien. Check all that apply.			
An agreement you made (such as	mortgage or secured	car loan)	

Add the dollar value of your entries in Column A on this page. Write that number here:

\$30,660.00

If this is the last page of your form, add the dollar value totals from all pages. Write that number here:

\$164,155.00

D	ocument Page 21 of	47		
Fill in this information to identify your c	ase:			
Debtor 1 Eliezer	Encarnacion			
First Name Middle Name	Last Name			
Debtor 2 (Spouse, if filing) First Name Middle Name	Last Name			
United States Bankruptcy Court for the: NORTHER	RN DISTRICT OF ILLINOIS			
Case number (if known)			Check if this is a amended filing	an
Official Form 106E/F				
Schedule E/F: Creditors Who Have	e Unsecured Claims			12/15
claims. List the other party to any executory control of Schedule A/B: Property (Official Form 106A/B) to not include any creditors with partially secured f more space is needed, copy the Part you need, for this page. On the top of any additional pages, we have	and on Schedule G: Executory Co. I claims that are listed in Schedule III it out, number the entries in the rrite your name and case number (ntracts and Unexpired D: Creditors Who Hoboxes on the left. At	d Leases (Officia old Claims Secur	l Form 106G). ed by Property.
Do any creditors have priority unsecured clair				
☐ No. Go to Part 2. ☐ Yes.	no agamet you:			
List all of your priority unsecured claims. If a claim. For each claim listed, identify what type o show both priority and nonpriority amounts. As n more space is needed for priority unsecured claim claim, list the other creditors in Part 3.	f claim it is. If a claim has both priorinuch as possible, list the claims in al	ty and nonpriority amo phabetical order accor	ounts, list that clair ding to the credito	m here and or's name. If
(For an explanation of each type of claim, see the	e instructions for this form in the inst	ruction booklet. Total claim	Priority amount	Nonpriority amount
2.1		\$9,111.00	\$9,111.00	\$0.00
RS	Last 4 digits of account number			
Priority Creditor's Name P.O. Box 7346	When was the debt incurred?			
Number Street				
Philadelphia PA 19101-7346	As of the date you file, the claim Contingent	is: Check all that appl	y.	
City State ZIP Code Who incurred the debt? Check one.	Unliquidated Disputed			
Debtor 1 only Debtor 2 only	Type of PRIORITY unsecured cla	im:		
Debtor 1 and Debtor 2 only	☐ Domestic support obligations			
At least one of the debtors and another	Taxes and certain other debts Claims for death or personal in		ent	
Check if this claim is for a community debt	intoxicated	jai, willio you word		
s the claim subject to offset? √INo	Other. Specify			
Yes				

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Debtor 1

Eliezer First Name Middle Name

Part 1: Your PRIORITY Unsecured C	laims Continuation Page			
After listing any entries on this page, number ther previous page.	n sequentially from the	Total claim	Priority amount	Nonpriority amount
2.2		\$0.00	\$0.00	\$0.00
Renneth Borcia & Associates Priority Creditor's Name 1117 S. Milwaukee., Suite A-3 Number Street	- Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is:	/15/2016	shv	
Libertyville IL 60048 City State ZIP Code Who incurred the debt? Check one.	Contingent Unliquidated Disputed	Officer all triat app	ny.	
□ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only ☑ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? ☑ No □ Yes	Type of PRIORITY unsecured claim: □ Domestic support obligations □ Taxes and certain other debts you □ Claims for death or personal injury intoxicated □ Other. Specify Attorney fees for	owe the governm while you were	ent	

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Debtor 1 Eliezer Page 23 of 47

First Name Middle Name Last Name

Part 2: List All of Your NONPRIORITY Unsecured Claims

3. Do any creditors have nonpriority unsecured claims against you?

No. You have nothing to report in this part. Submit this form to the court with you other schedules.

✓ Yes

1. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim.

If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If more space is needed for nonpriority unsecured claims, fill out the Continuation Page of Part 2.

		Total claim
4.1 AT&T Nonpriority Creditor's Name P.O. Box 8212	Last 4 digits of account number When was the debt incurred?	\$259.00
Aurora City State Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes	As of the date you file, the claim is: Check all that apply. ☐ Contingent ☐ Unliquidated ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ☑ Other. Specify	
Linebarger Goggan Blair & Sampson Nonpriority Creditor's Name P.O. Box 06152 Number Street Chicago IL 60606-0152 City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset?	Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify	\$360.00
✓ No ☐ Yes		

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Case number (if known)

Debtor 1

First Name Middle Name

Part 3: List Others to Be Notified About a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional parties to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Bay Area Credit S	ervice, LLC	On which entry in Part 1 or Part 2 did you list the original creditor?					
Name 1000 Abernathy Roumber Street	d., NE, Ste. 195	Lineof (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims					
Atlanta City	GA 30328 State ZIP Code	Last 4 digits of account number					
City of Waukegan		On which entry in Part 1 or Part 2 did you list the original creditor?					
100 N. Martin Luth	er King Jr Ave.	Line of (Check one): Part 1: Creditors with Priority Unsecured Claims					
Number Street		Part 2: Creditors with Nonpriority Unsecured Claims					
Waukegan City	IL 60085 State ZIP Code	Last 4 digits of account number					

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Debtor 1

First Name

Middle Name

Part 4: Add the Amounts for Each Type of Unsecured Claim

Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

				Total claim
Total claims from Part 1	6a.	Domestic support obligations	6a.	\$0.00
	6b.	Taxes and certain other debts you owe the government	6b.	\$9,111.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d. -	\$0.00
	6e.	Total. Add lines 6a through 6d.	6d.	\$9,111.00
				Total claim
Total claims from Part 2	6f.	Student loans	6f.	Total claim
		Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6f. 6g.	
	6g.	Obligations arising out of a separation agreement or divorce		\$0.00
	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar	6g.	\$0.00 \$0.00

Fill in this information to identify your case:						
Debtor 1	Eliezer	Middle Name	Encarnacion			
	First Name	Middle Name	Last Name			
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name			
United States Rai	okruptov Court fo	or the: NORTHERN D	ISTRICT OF ILLINOIS			
	initiapity Court it	or the. NORTHERN D	IOTRIOT OF IEEHVOID	—		
Case number (if known)						

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

1.	Do you have any executory contracts or unexpired leases?
	No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
	Yes Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B)

2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease

State what the contract or lease is for

Fill i	n this inf	ormation to	identify your case:	mem Pane / I		
Debto	or 1	Eliezer		Encarnacion		
5		First Name	Middle Name	Last Name		
Debto (Spou	or 2 use, if filing)	First Name	Middle Name	Last Name	—	
Unite	d States Bar	nkruptcy Court fo	or the: NORTHERN D I	ISTRICT OF ILLINOIS		
	number	. ,				
(if kno	own)				☐ Check if this is an amended filing	
Offic	ial Form	106H				
Sche	edule H:	Your Cod	lebtors		12 <i>f</i>	15
needed page.	d, copy the On the top	Additional Page	e, fill it out, and numbe al Pages, write your na	r the entries in the boxes	ng correct information. If more space is son the left. Attach the Additional Page to this known). Answer every question. spouse as a codebtor.)	
✓	-					
ind Z Z 3. In pe cr	Clude Arizon No. Go t Yes. Did No Yes Column 1, erson show editor on S	a, California, Ida o line 3. your spouse, fo list all of your on in line 2 again chedule D (Offi	codebtors. Do not included as a codebtor only if	New Mexico, Puerto Rico, quivalent live with you at the quivalent live with you at the quivalent live with you at the quivale your spouse as a code that person is a guarantor dule E/F (Official Form 100)	debtor if your spouse is filing with you. List the or or cosigner. Make sure you have listed the 06E/F), or <i>Schedule G</i> (Official Form 106G). Use	
	Column 1:	Your codebtor	•		Column 2: The creditor to whom you owe the debt	
					Check all schedules that apply:	
3.1	Spouse Name	Name Not Ente	ered		Schedule D, line	
	Number	Street			Schedule E/F, line 4.1	
		Olicci		_	_ Schedule G, line	
					AT&T	
	City		State	ZIP Code	_	
3.2	Spouse Name	Name Not Ente	ered		Schedule D, line	
	Number	Street			Schedule E/F, line 5.1	
		Gucci			Schedule G, line	
					Bay Area Credit Service, LLC	
	City		State	ZIP Code	-	
3.3	Spouse Name	Name Not Ente	ered		Schedule D, line 2.1	
		Stroot			Schedule E/F, line	
	Number	Street			Schedule G, line	
					Carrington Mortgage Services	

ZIP Code

State

City

Debtor 1

Eliezer First Name

Middle Name

Loot Nome

Doctropic Page 28 of 43e number (if known)

Additional Page to List More Codebtors

	Column 1: Your codebtor			Column 2: The creditor to whom you owe the deb
				Check all schedules that apply:
3.4	Spouse Name Not Entered			—
	Name			Cabadula E/E line
	Number Street			
				Schedule G, line Carrington Mortgage Services
	City	State	ZIP Code	
3.5	Spouse Name Not Entered			_ 0.1 1.1 0.11
	Name			Schedule D, line
	Number Street			Schedule E/F, line 5.2
				Schedule G, line
	City	State	ZIP Code	City of Waukegan
3.6	Spouse Name Not Entered Name			Schedule D, line
	Number Street			Schedule E/F, line 2.1
				Schedule G, line
				IRS
	City	State	ZIP Code	
3.7	Spouse Name Not Entered Name			Schedule D, line
				— ✓ Schedule E/F, line 2.2
	Number Street			Schedule G, line
				Kenneth Borcia & Associates
	City	State	ZIP Code	_
3.8	Spouse Name Not Entered			─ ☐ Schedule D, line
	Name			
	Number Street			Schedule E/F, line 4.2
				Schedule G, line Linebarger Goggan Blair & Sampson
	City	State	ZIP Code	— Emedarger Goggan Blair & Gampson
2.0	Spouse Name Not Entered			
3.9	Name			Schedule D, line 2.3
	Number Street			Schedule E/F, line
				Schedule G, line
	Oit.	04-4-	710.0-1-	Trinity Financial Services
	City	State	ZIP Code	
3.10	Spouse Name Not Entered Name			Schedule D, line 2.4
	Number Street			Schedule E/F, line
				Schedule G, line
				Trinity Financial Services
	City	State	ZIP Code	

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,	Case 10-00121	_			ი f 47		3.20.12 Desc	iviaiii	
Fill in t	his information t	o identify your case:			(11 2 /				
Debtor	1 Elieze	r	Encarna	cion					
	First Nan	ne Middle Name	Last Name			— Che	ck if this is:		
Debtor :	2 e, if filing) First Nan	ne Middle Name	Last Name			$- \Box $	An amended filing		
` '	States Bankruptcy Co		DISTRICT OF IL	LINO	IS		A supplement showing		
Case no				_			chapter 13 income as o	of the fo	ollowing date:
(II KIIOW	, iii						MM / DD / YYYY		
	Form 106I								
Schedu	ule I: Your Inc	ome							12/15
include inf	formation about your r spouse. If more sp	ect information. If you are separ ace is needed, attach a sef known). Answer every of the comment acts and the comment acts are acts and acts are acts are acts and acts are acts and acts are acts acts and acts are acts and acts are acts and acts are acts are acts and acts are acts acts are acts and acts are acts acts and acts are acts acts are acts are acts and acts are acts acts are acts and acts are acts acts and acts are acts acts are acts acts and acts are acts acts and acts are acts acts and acts are acts acts are acts acts and acts are acts acts access and acts are acts access and acts are acts access access access access access access access are access access access access access access access access access	rated and your spo eparate sheet to th	ouse i	s not fili	ng with y	ou, do not include info	rmatio	1
	your employment								
inforn	nation.		Debtor 1				Debtor 2 or non-filin	g spou	se
-	have more than one ttach a separate page	Employment status	Employed				☐ Employed		
	nformation about onal employers.		✓ Not employed	ed			✓ Not employed		
Includ	le part-time, seasonal,	Occupation							
	f-employed work.	Employer's name	U Next Barber	Acad	lemy		edd		
	pation may include	Employer's address	6170 Grand Av	/e.			1050 Red Oak Ln.		
studei applie	nt or homemaker, if it es.		Number Street				Number Street		
			Gurnee City		IL 6	0031	Lindenhurst City	IL State	60046 Zip Code
					State 2	ip Code	City	State	Zip Code
		How long employed t	nere ?						_
Part 2:	Give Details A	About Monthly Incom	ie						
Estimate n	nonthly income as of	f the date you file this for	n. If you have noth	ing to	report fo	or any line,	, write \$0 in the space.	Include	your
Ū	pouse unless you are	•		4:	f 1			liana h	-l If
		have more than one employ separate sheet to this form.	er, combine the info	ormati	on for al	employer	s for that person on the	lines b	elow. If
					For Del	otor 1	For Debtor 2 or non-filing spouse	_	
	II deductions). If not p	, salary, and commission aid monthly, calculate wha		2.	\$2	,000.00	\$2,600.00		
3. Estim	ate and list monthly	overtime pay.		3. 4		\$0.00	\$0.00		

\$2,000.00 \$2,600.00

4. Calculate gross income. Add line 2 + line 3.

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Debtor 1 Eliezer

First Name

Middle Name

		F	For Debtor 1		btor 2 or ing spouse	<u> </u>	
	Copy line 4 here	→ 4.	\$2,000.00	\$2	2,600.00		
5.	List all payroll deductions:	-	 ,		,		
	5a. Tax, Medicare, and Social Security deductions	5a.	\$0.00		\$487.50		
	5b. Mandatory contributions for retirement plans	5b.	\$0.00		\$0.00		
	5c. Voluntary contributions for retirement plans	5c.	\$0.00		\$0.00		
	5d. Required repayments of retirement fund loans	5d.	\$0.00		\$0.00		
	5e. Insurance	5e.	\$0.00		\$517.47		
	5f. Domestic support obligations	5f.	\$0.00		\$0.00		
	5g. Union dues	5g.	\$0.00		\$0.00		
	5h. Other deductions.	٠9.		-			
	Specify:	5h. +	\$0.00		\$0.00		
6.	Add the payroll deductions. Add lines $5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h$.	6.	\$0.00	\$^	1,004.97		
7.	Calculate total monthly take-home pay. Subtract line 6 from line 4	. 7.	\$2,000.00	\$	1,595.03		
8.	List all other income regularly received:						
	8a. Net income from rental property and from operating a business, profession, or farm	8a.	\$0.00		\$0.00		
	Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.						
	8b. Interest and dividends	8b.	\$0.00		\$0.00		
	8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive	8c.	\$0.00		\$0.00		
	Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.						
	8d. Unemployment compensation	8d.	\$0.00		\$0.00		
	8e. Social Security	8e.	\$0.00		\$0.00		
	8f. Other government assistance that you regularly receive		· · · · · · · · · · · · · · · · · · ·				
	Include cash assistance and the value (if known) or any non- cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.						
	Specify:	8f.	\$0.00		\$0.00		
		_					
	8g. Pension or retirement income	8g.	\$0.00		\$0.00		
	8h. Other monthly income. Specify: temp. part-time job	8h. 🛧	\$1,000.00		\$0.00		
	temp. part-time job	_ · . _	Ψ1,000.00	_	Ψ0.00	1	
9.	Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h.	. 9.	\$1,000.00		\$0.00		
10.	Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	\$3,000.00	+\$	1,595.03]=[\$4,595.03
11.	State all other regular contributions to the expenses that you list in Include contributions from an unmarried partner, members of your house friends or relatives.			ır roomma	ites, and ot	her	
	Do not include any amounts already included in lines 2-10 or amounts the	hat are no	t available to pay	expenses	listed in Sc	hedi	ule J.
	Specify:				11.	+	\$0.00
12.	Add the amount in the last column of line 10 to the amount in line 1 income. Write that amount on the Summary of Your Assets and Liabiliti if it applies.						\$4,595.03 Combined
42	De veu symaat en inswaas en decreas within the vers of the vers	Abla farr	-2			r	nonthly income
13.	Do you expect an increase or decrease within the year after you file	tnis torn	n r				
	No. might be leaving part-time job in a month✓ Yes. Explain:						

Document Page 31 of 47 Case number (if known) Debtor 1 Eliezer Last Name First Name Middle Name Additional Employers Debtor 1 Debtor 2 or non-filing spouse Occupation **Best Quality Facility Services** Employer's name 10015 Pacific Ave. Employer's address Franklin Park IL 60131 City City State Zip Code State Zip Code 2 mths How long employed there?

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Case 16-08127

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Official Form 106l Schedule I: Your Income page 3

F	ill in this inform	nation to iden	tify your case:			Cho	ak if thia	, io:	
	Debtor 1	Eliezer		Enca	rnacion		ck if this An ame	ended filing	
		First Name	Middle Name	Last Na	ime			lement showing	
	Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Na	ame		following	r 13 expenses a ng date:	is of the
	United States Bankr								
	Case number	upicy Court for it	ie. <u>NORTHERN DR</u>	STRICT O	FILLINOIS		MM / D	D / YYYY	
	(if known)]			
\bigcirc t	fficial Form 10	ie i							
_	chedule J: Yo								12/15
Be cor nar	as complete and actrect information. If	ccurate as possi f more space is er (if known). Ar	ible. If two married pe needed, attach anothe nswer every question.	r sheet to t					pplying
ŀ	Part 1: Descri	be Your Hous	sehold						
1.	Is this a joint case	e?							
	_ No	ebtor 2 live in a	separate household?	2, Expense	s for Separate House	hold of	Debtor	2.	
2.	Do you have depe	endents?] No						
	Do not list Debtor Debtor 2.	1 and	Yes. Fill out this inforeach dependent.				o to	Dependent's age	Does dependent live with you? No
	Do not atoto the de	anandanta'			child			<u>23 yrs.</u>	- ☑ Yes
	Do not state the de names.	ependents							□ No - □ Yes
									☐ No
									- ☐ Yes
									□ No □ Yes
									□ No
									- ☐ Yes
3.	Do your expenses expenses of peop yourself and your	ole other than	☑ No ☐ Yes						
P	Part 2: Estima	ate Your Ongo	oing Monthly Expe	enses					
		-	nkruptcy filing date u he bankruptcy is filed.	-	-	-	-	-	
	form and fill in the	• •							
	•		ish government assist on Schedule I: Your In	•				Your expen	ses
4.			penses for your resided				4	4	\$1,600.00
	If not included in	line 4:							
	4a. Real estate ta	axes					4	4a	
	4b. Property, hon	neowner's, or ren	ter's insurance				4	4b	
	4c. Home mainte	nance, repair, an	d upkeep expenses				4	4c	\$350.00

4d.

4d. Homeowner's association or condominium dues

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Debtor 1 Eliezer

First Name

Middle Name

Last Name

		Your expen	ses
5.	Additional mortgage payments for your residence, such as home equity loans	5	\$639.00
6.	Utilities:		
	6a. Electricity, heat, natural gas	6a.	\$325.00
	6b. Water, sewer, garbage collection	6b	\$25.00
	6c. Telephone, cell phone, Internet, satellite, and cable services	6c	\$250.00
	6d. Other. Specify:	6d.	
7.	Food and housekeeping supplies	7.	\$550.00
8.	Childcare and children's education costs	8.	
9.	Clothing, laundry, and dry cleaning	9.	\$65.00
10.	Personal care products and services	10.	\$80.00
11.	Medical and dental expenses	11.	\$100.00
12.	Transportation. Include gas, maintenance, bus or train fare. Do not include car payments.	12.	\$350.00
13.	Entertainment, clubs, recreation, newspapers, magazines, and books	13.	
14.	Charitable contributions and religious donations	14.	
15.	Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20.		
	15a. Life insurance	15a.	
	15b. Health insurance	15b.	
	15c. Vehicle insurance	 15c.	\$100.00
	15d. Other insurance. Specify:	 15d.	·
16.	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify:	 16.	
17	Installment or lease payments:		
	17a. Car payments for Vehicle 1	17a.	
	17b. Car payments for Vehicle 2	471	
		470	
	17c. Other. Specify:		
18.	Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	
	,		
	Other payments you make to support others who do not live with you. Specify:	19	
20.	Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.		
	20a. Mortgages on other property	20a	
	20b. Real estate taxes	20b	
	20c. Property, homeowner's, or renter's insurance	20c	
	20d. Maintenance, repair, and upkeep expenses	20d	
	20e. Homeowner's association or condominium dues	20e	

		Case 16-08127	Doc 1	Filed 03/09/16		9/16 13:20:12	Desc Main
Deb	tor 1	Eliezer		Document Encarnació	Page 34 of 47	Case number (if know	wn)
		First Name	Middle Name	Last Name	 -	,	, -
21.						21.	+
22.	Calc	culate your monthly expe	nses.				
	22a.	Add lines 4 through 21.				22a.	\$4,434.00
	22b.	Copy line 22 (monthly e	xpenses for	Debtor 2), if any, from Off	ficial Form 106J-2.	22b.	
	22c.	Add line 22a and 22b.	The result is	your monthly expenses.		22c.	\$4,434.00
23.	Calc	culate your monthly net in	ncome.				
	23a.	Copy line 12 (your comb	oined monthl	y income) from Schedule	· I.	23a.	\$4,595.03
	23b.	Copy your monthly expe	enses from lir	ne 22c above.		23b.	\$4,434.00
	23c.	Subtract your monthly e The result is your month				23c.	\$161.03
24.	Do y	ou expect an increase o	r decrease i	n your expenses within	the year after you fi	le this form?	
		example, do you expect to nent to increase or decrea	. , .			, ,	
		No					
		Yes. Explain here: First mortgage w	vill be paid	Janauary 2018			

F	ill in this inf	ormation to ide	ntify your case:	Hell Page 35 OF		
D	ebtor 1	Eliezer First Name	Middle Nege	Encarnacion		
D	ebtor 2	First Name	Middle Name	Last Name		
	Spouse, if filing)	First Name	Middle Name	Last Name		
U	nited States Bar	nkruptcy Court for the	e: NORTHERN DIS	STRICT OF ILLINOIS		
	ase number f known)				☐ Check i amende	f this is an ed filing
∩f	ficial Form	1069um				
			and Liahilitie	es and Certain Stat	istical Information	12/15
cor sch	rect informatio nedules after yo	n. Fill out all of you	ur schedules first; th forms, you must fill	nen complete the information	ooth are equally responsible form on this form. If you are filing leck the box at the top of this	g amended
						Your assets
4	Cabadula A/D	· Dranami · /Official F	orm 1064/D)			Value of what you own
1.		: Property (Official F	•			\$100,000.00
	та. Сорушне	5 55, Total Teal estate	s, Irom Schedule A/D			·
	1b. Copy line	e 62, Total personal p	property, from Schedu	ule A/B		\$16,985.00
	1c. Copy line	e 63, Total of all prop	erty on Schedule A/B			\$116,985.00
Р	art 2: Sur	mmarize Your L	iabilities			
						Your liabilities Amount you owe
2.				roperty (Official Form 106D) laim, at the bottom of the last	page of Part 1 of Schedule D	¢464.455.00
3.	Schedule E/F:	: Creditors Who Have	e Unsecured Claims	(Official Form 106E/F)		
				,	edule E/F	\$9,111.00
	3b. Copy the	total claims from Pa	rt 2 (nonpriority unse	cured claims) from line 6j of S	Schedule E/F	+\$619.00
					Your total liabilities	\$173,885.00
Р	art 3: Sur	mmarize Your Ir	ncome and Expe	nses		
4.		our Income (Official I		hedule I		\$4,595.03

5. Schedule J: Your Expenses (Official Form 106J)

Copy your monthly expenses from line 22c of Schedule J.....

\$4,434.00

Debtor 1 Eliezer DOŒntremácion Page 36 of se number (if known)
First Name Middle Name Last Name

Part 4: Answer These Questions for Administrative and Statistical Records

6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. Yes
7.	What kind of debt do you have? Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal,
	family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159. Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.
8.	From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14. \$5,823.00

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total claim
From Part 4 on Schedule E/F, copy the following:	
9a. Domestic support obligations. (Copy line 6a.)	\$0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$9,111.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$0.00
9d. Student loans. (Copy line 6f.)	\$0.00
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) 	\$0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$0.00
9g. Total. Add lines 9a through 9f.	\$9,111.00

First Name Middle Nankruptcy Court for the:	Encarnacion Name Last Name	— ☐ Check if this is an	
First Name Middle N First Name Middle N	Name Last Name Name Last Name	<u> </u>	
		<u> </u>	
ankruptcy Court for the: NORT	HERN DISTRICT OF ILLINOIS	<u> </u>	
		<u> </u>	
		amended filing	
n 106Dec			
About an Individua	al Debtor's Schedules		12/15
erty, or obtaining money or p risonment for up to 20 years,	roperty by fraud in connection with	a bankruptcy case can result in fines up to	
or agree to pay someone wh	o is NOT an attorney to help you fi	Il out bankruptcy forms?	
		Attach Bankruptcy Petition Preparer's Not	ice
lame of person		Declaration, and Signature (Official Form	
	cople are filing together, both is form whenever you file ban erty, or obtaining money or p risonment for up to 20 years, gn Below	About an Individual Debtor's Schedules cople are filing together, both are equally responsible for supply as form whenever you file bankruptcy schedules or amended scherty, or obtaining money or property by fraud in connection with risonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 15	About an Individual Debtor's Schedules sople are filing together, both are equally responsible for supplying correct information. soform whenever you file bankruptcy schedules or amended schedules. Making a false statement, early, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to risonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

MM / DD / YYYY

Date

Date 03/05/2016 MM / DD / YYYY

	Ouse	10 00127 2	Doci	iment P	ane 38 of 47	10 10.20.12	DCSO Main	
F	ill in this info	ormation to iden						
D	ebtor 1	Eliezer First Name	Middle Name	Encarnac Last Name	ion			
	ebtor 2 Spouse, if filing)	First Name	Middle Name	Last Name				
U	nited States Bar	nkruptcy Court for the	: NORTHERN D	ISTRICT OF IL	LINOIS			
_	ase number f known)					_	ck if this is an ended filing	
	ficial Form							
St	atement o	f Financial Af	fairs for Ind	ividuals Fi	ling for Bankr	uptcy	12/1	5
yοι	ur name and ca	se number (if know	n). Answer every	question.	to this form. On the	. ,	pages, write	
1.	What is your of Married Not married	current marital stat ued	us?					
2.	☑ No	st 3 years, have you all of the places you	•		you live now?	ow.		
	Debtor 1:			es Debtor 1 d there	Debtor 2:		Dates Debtor 2 lived there	
3.	(Community p	•	•	• •	uivalent in a commur Idaho, Louisiana, Nev		•	

Yes. Make sure you fill out *Schedule H: Your Codebtors* (Official Form 106H).

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Debtor 1

Eliezer First Name

Middle Name

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Part 2:	Explain the Sources of Your Income

4.	Fill in the total amount of income you receil f you are filing a joint case and you have in	ved from all jobs and all bus	inesses, including par	t-time activities.	endar years?
	No✓ Yes. Fill in the details.				
		Debtor 1		Debtor 2	
		Sources of income Check all that apply.	Gross income (before deductions and exclusions	Sources of income Check all that apply.	Gross income (before deductions and exclusions
	m January 1 of the current year until date you filed for bankruptcy:	Wages, commissions, bonuses, tips		Wages, commissions, bonuses, tips	-
		Operating a business		Operating a business	
For	the last calendar year:	Wages, commissions, bonuses, tips	\$50,000.00	Wages, commissions, bonuses, tips	
(Ja	nuary 1 to December 31, 2015)	Operating a business		Operating a business	
For	the calendar year before that:	Wages, commissions, bonuses, tips	\$40,000.00	Wages, commissions, bonuses, tips	
(Ja	nuary 1 to December 31, 2014)	Operating a business		Operating a business	
5.	Did you receive any other income during Include income regardless of whether that unemployment; and other public benefit pa and gambling and lottery winnings. If you a Debtor 1. List each source and the gross income from No Yes. Fill in the details.	income is taxable. Example syments; pensions; rental incare in a joint case and you have	es of other income are come; interest; dividend ave income that you re	ds; money collected from laveceived together, list it only constant	vsuits; royalties;

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Eliezer

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Debtor 1

First Name Middle Name

Part 3: List Certain Payments You Made Before You Filed for Bankruptcy

6.	Are eithe	er Debtor	1's or Debtor 2's debts prima	rily consumer	debts?		
	□ No.		Debtor 1 nor Debtor 2 has produced by an individual primarily for a	-			d in 11 U.S.C. § 101(8) as
		During t	the 90 days before you filed for	bankruptcy, dic	I you pay any credito	or a total of \$6,225*	or more?
		☐ No.	Go to line 7.				
		☐ Yes.	List below each creditor to wh total amount you paid that cre child support and alimony. Al	ditor. Do not in	clude payments for	domestic support ob	oligations, such as
		* Subje	ct to adjustment on 4/01/16 and	l every 3 years	after that for cases fi	iled on or after the d	ate of adjustment.
	✓ Yes.	Debtor	1 or Debtor 2 or both have pri	imarily consur	ner debts.		
		During t	the 90 days before you filed for	bankruptcy, dic	I you pay any credito	or a total of \$600 or i	more?
		✓ No.	Go to line 7.				
		☐ Yes.	List below each creditor to wh creditor. Do not include paym Also, do not include payments	nents for domes	tic support obligation	ns, such as child su	
				Dates of payment	Total amount paid	Amount you stil owe	Was this payment for
7.	Insiders in corporation agent, income	include you ons of wh cluding or	•	ers; relatives of person in contro	any general partners	s; partnerships of whor more of their votin	
	✓ No ☐ Yes.	List all p	ayments to an insider.				
				Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
8.		year befo	ore you filed for bankruptcy, d	lid you make a	ny payments or tra	nsfer any property	on account of a debt that
	Include p	ayments	on debts guaranteed or cosigne	ed by an insider			
	✓ No ☐ Yes.	List all p	ayments that benefited an insid	er.			
				Dates of payment	Total amount paid	Amount you still owe	Reason for this payment Include creditor's name

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Debtor 1 Eliezer Documentation Page 41 of A number (if known)

First Name Middle Name Last Name

Part 4: Identify Legal Actions, Repossessions, and Foreclosures

9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding?

9.	-	ers, including pe	or bankruptcy, were you a pa ersonal injury cases, small clai tes.			•	_
	✓ No ☐ Yes. Fill in the	ne details.					
			Nature of the case		Court or agency		Status of the case
10.	Within 1 year be seized, or levied Check all that ap	l?	or bankruptcy, was any of your details below.	our property r	epossessed, foreclo	osed, garnished, atta	ched,
	No. Go to lin Yes. Fill in the	ne 11. ne information b	elow.				
11.	-	-	for bankruptcy, did any cree r refuse to make a payment			ll institution, set off a	any
	✓ No ☐ Yes. Fill in the	ne details.					
12.	-	-	or bankruptcy, was any of yo ceiver, a custodian, or anoth		the possession of	an assignee for the	benefit of
	✓ No ☐ Yes						
Pa	art 5: List C	Certain Gifts	and Contributions				
13.	Within 2 years b	efore you filed	for bankruptcy, did you give	any gifts with	a total value of mo	ore than \$600 per per	son?
	⋈ No						
	Yes. Fill in the	ne details for ea	ch gift.				
14.	Within 2 years b to any charity?	efore you filed	for bankruptcy, did you give	e any gifts or c	ontributions with a	total value of more t	han \$600
	✓ No ☐ Yes. Fill in the	ne details for ea	ch gift or contribution.				
Pa	art 6: List C	Certain Loss	es				
15.	Within 1 year be other disaster, c	-	or bankruptcy or since you f	iled for bankr	uptcy, did you lose	anything because of	theft, fire,
	✓ No ☐ Yes. Fill in the	ne details.					

Debtor 1

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	madio Hamo	2451.14.110		
Part 7: List Certain Pa	yments or	Transfers		
anyone you consulted abou	ıt seeking ba	ptcy, did you or anyone else acting on your behalf pay nkruptcy or preparing a bankruptcy petition? preparers, or credit counseling agencies for services requi		
□ No	proy polition p	roparois, or oreal counseling agentices for services requi	iod for your burnings	oy.
Yes. Fill in the details.				
enneth S. Borcia & Associa	ites	Description and value of any property transferred	Date payment or transfer was	Amount of payment
son Who Was Paid			made	¢4.000.00
17 S. Milwaukee, Suite A-3 nber Street	<u> </u>	_	02/06/2016	\$4,000.00
		-		_
pertyville IL	60048	_		
State	ZIP Code			
ail or website address		-		
son Who Made the Payment, if Not Y	Y ou	_		
icket Debt Counseling		Description and value of any property transferred	Date payment or transfer was	Amount of payment
son Who Was Paid		-	made	
nber Street		_	02/12/2016	\$25.00
ilbei Street		_		
State	ZIP Code	-		
ail or website address		_		
son Who Made the Payment, if Not Y	⁄ou	-		
	elp you deal v	ptcy, did you or anyone else acting on your behalf pay with your creditors or to make payments to your credit t you listed on line 16.		perty to

☑ No

Yes. Fill in the details.

Debt	Case 16-08127 Doc 1 Filed 03/09/16 Entered 03/09/16 13:20:12 Desc Main tor 1 Eliezer Documentation Page 43 of As a number (if known)						
	First Name Middle Name Last Name	_					
18.	Nithin 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs?						
	Include both outright transfers and transfers made as security (such as granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement.						
	✓ No Yes. Fill in the details.						
19.	Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.)						
✓ No ✓ Yes. Fill in the details.							
Pa	List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units						
20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for you benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brohouses, pension funds, cooperatives, associations, and other financial institutions.							
							✓ No Yes. Fill in the details.
21.	Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?						
	✓ No ☐ Yes. Fill in the details.						
22.	Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? ✓ №						
	Yes. Fill in the details.						
Pa	Identify Property You Hold or Control for Someone Else						
23.	Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone.						
	✓ No ☐ Yes. Fill in the details.						

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Debtor 1

Eliezer First Name

Middle Name

Last Name

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Part 10: Give Details About Environmental Information

For the purpose of Part 10, the following definitions apply:

- Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substance, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.
- Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.

	substance, hazardous material, pollutant, contaminant, or similar item.						
Report all notices, releases, and proceedings that you know about, regardless of when they occurred.							
24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?							
	✓ No Yes. Fill in the details.						
25.	Have you notified any governmental unit of any release of hazardous material? ☑ No ☐ Yes. Fill in the details.						
26.	Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.						
	✓ No Yes. Fill in the details.						
P	art 11: Give Details About Your Business or Connections to Any Business						
27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?							
	A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time A member of a limited liability company (LLC) or limited liability partnership (LLP) A partner in a partnership An officer, director, or managing executive of a corporation An owner of at least 5% of the voting or equity securities of a corporation						
	✓ No. None of the above applies. Go to Part 12.✓ Yes. Check all that apply above and fill in the details below for each business.						
28.	Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties.						
	☐ No☐ Yes. Fill in the details below.						

Debtor 1

Eliezer First Name

Documentation Page 45 of 43e number (if known)

Middle Name Last Name

Part 12:	Sign	Below
	3	

I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

X /s/ Eliezer Encarnacion	X								
Signature of Debtor 1	Signature of Debtor 2								
Date03/05/2016	Date								
Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?									
☑ No									
Yes									
Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?									
⋈ No									
Yes. Name of person	Attach the Bankruptcy Petition Preparer's Notice,								
	Declaration, and Signature (Official Form 119).								

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B2030 (Form 2030) (12/15)

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS CHICAGO DIVISION (EASTERN)

In	re Eliezer Encarnacion	Case No.			
		Chapter	13		
	DISCLOSURE OF COMPENSATION OF A	TTORNEY FOR	DEBTOR		
1. Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the ban is as follows:					
	For legal services, I have agreed to accept	\$4	,000.00		
	Prior to the filing of this statement I have received	\$4	,000.00		
	Balance Due		\$0.00		
2.	. The source of the compensation paid to me was: ☐ Other (specify)				
3.	. The source of compensation to be paid to me is:				
	✓ Debtor				
4.	. I have not agreed to share the above-disclosed compensation with a associates of my law firm.	any other person unles	s they are members and		
☐ I have agreed to share the above-disclosed compensation with another person or persons who are not mem associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing ir compensation, is attached.					
5.	. In return for the above-disclosed fee, I have agreed to render legal service	ce for all aspects of the	e bankruptcy case, including:		
	a. Analysis of the debtor's financial situation, and rendering advice to the bankruptcy;	whether to file a petition in			
	b. Preparation and filing of any petition, schedules, statements of affairs	and plan which may b	e required;		
	c. Representation of the debtor at the meeting of creditors and confirma	tion hearing, and any a	adjourned hearings thereof;		

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6. By agreement with the debtor(s), the above-disclosed fee does not include the following services:

SERVICES REQUESTED AFTER DISCHARGE AND/OR DISMISSAL REPRESENTATION OF THE DEBTOR IN ADVERSARY PROCEEDINGS

CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

03/05/2016 /s/ Kenneth S. Borcia

Date Kenneth S. Borcia Bar No. 3125988

Kenneth S. Borcia & Associates 1117 S. Milwaukee, Suite A-3 Libertyville, IL 60048

Phone: (847) 634-8800 / Fax: (847) 634-8932

/s/ Eliezer Encarnacion

Eliezer Encarnacion